

ROUTING AND TRANSMITTAL SLIP

Date

TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. EO	WZ	4/11
2. DDIS	BZ	4/11
3. DIS STAT	BZ	4/12
4. CCRD		4/12
5. Karen - file Liaison/NARS		

Action	File	Note and Return
Approval	For Clearance	Per Conversation
As Requested	For Correction	Prepare Reply
Circulate	For Your Information	See Me
Comment	Investigate	Signature
Coordination	Justify	

REMARKS

STAT
STAT

I hope
will cooperate in this request.
A little PR with a man like
Thompson goes a long way in
fostering harmonious relations
with NARS, and getting their
cooperation in matters of interest
to us. AG

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)	Room No.—Bldg.
	Phone No.

5041-102

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